T-825 P.001

F-305

"PATENT"

AMENDMENT TRANSMITTAL FORM											
U. Fill Fo	S. Serial No. led: July 6, r: REMO HYDR munissioner ail Stop Am D. Box 1450	WABLE FILTER FOI OCARBON SYNTHI for Patents endment	100] R SLURRY	s)	Kri Cor Gro	Fore the Exam shnan S. Men infirmation Nu oup Art Unit: nily Number:	on mber: 7252 1723	RECEN GENTRAL FAX JUL 2 1 US2	(Center		
CERTIFICATION OF FACSIMILE TRANSMISSION I hereby certify that this paper is being facsimile transmitted to the Commissioner for Patents facsimile number 1-703-872-9306 on the date shown below.											
1-		EEN A. KU		Ka tallan In	N	hr-	JUly a	21,2004	-		
L	Name of	person signing certification	on	Signatu	e		·	Date	_		
Transmittal herewith is an amendment/response in the above-identified application. Petition for extension of time pursuant to 37 CFR 1.136 and 1.137 is hereby made, if and to the extent, required. The fee for this extension of time is calculated to be \$											
		- I I I I I I I I I I I I I I I I I I I		CLAIMS AS AMENDED							
	(1)	(2) Claims Remaining After Amendment	(3)	(4) Highest Number Previously Paid		(5) Present Extra	(6) Rate	(7)			
	Total Claims	* 5	Minus	**	2 0		x 18.00				
	Indep. Claims	*	Minus	***	, 2		x 86.00				
	MULTIPLE DEPENDENT CLAIM FEE \$290.										
					F	EE FOR CLAIM	1 CHANGES	0			
* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5. ** If the "Higher Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space. *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The total fee for this Amendment, including claim changes and any extension of time is calculated to be \$											
Ŀ	X Charge	\$ U to De	posit Account N	10. 05-1330.							
X The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 and 1.17 which may be required by this paper, or credit any overpayment, to Deposit Account No. 05-1330. A duplicate copy of this Form is enclosed.											
			7/2	104	_	m. Men					
D	ATE OF SIG	NATURE	*	<u> </u>	ATTORNEY OR AGENT OF RECORD						
P		Address: [to which co l Research and Engine		MARK D. MARIN							
	P. O. Box 90		Registration No. 50,842								

Annandale, New Jersey 08801-0900

PATENT TRADEMARK OFFICE

7/21/2004

X Pursuant to 37 CFR 1.34(a)

Facsimile Number: (908) 730-3649

MDM:kak

PAGE 6/12 * RCVD AT 7/21/2004 2:02:42 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-1/0 * DNIS:8729306 * CSID:908 730 3649 * DURATION (mm-ss):03-24

"PATENT"

AMENDMENT TRANSMITTAL FORM

In re application U. S. Serial Note Filed: July 6, For: REMO HYDRO)	Before the Examiner Krishnan S. Menon Confirmation Number: 7252 Group Art Unit: 1723 Family Number: P1999J003 US2							
Commissioner Mail Stop Am P.O. Box 1450 Alexandria, V	endment								
KATH(CEF I hereby ce Commissioner for Pa EEN A - KON person signing certificatio	ortify that this p tents facsimile	OF FACSIMILE T aper is being face number 1-703-87 Ka Hullan L, Signatu	imile t 72-930	ransmitted to	Shown below.	21, 200 Y Date		
Transmittal here Petition for extension of time	ewith is an amendment/re ension of time pursuant to ne is calculated to be \$ changes in number of cla	sponse in the ab	and 1.137 is hereby to extend the time f	made, or filing	if and to the ex	xtent, required. until	The fee for this		
			LAIMS AS AMENDE						
(1)	(2) Claims Remaining After Amendment	(3)	(4) Highest Numl Previously Paid	er	(5) Present Extra	(6) R <u>at</u> c	(7)		
Total Claims	* 5	Minus	**	20		x 18.00			
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The total fee for X Charge X The Courrequired	* If the entry in Column 2 is less than the cutry in Column 4, write "0" in Column 5. ** If the "Higher Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. ** Charge \$ O to Deposit Account No. 05-1330. ** The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 and 1.17 which may be required by this paper, or credit any overpayment, to Deposit Account No. 05-1330. A duplicate copy of this Form is enclosed.								
		7/2	1/04		M. Mar	<u> </u>			
DATE OF SIG	GNATURE			AT.	ATTORNEY OR AGENT OF RECORD				
Post Office	Address: [to which c	MARK D. MARIN							
ExxonMobil Research and Engineering Company P. O. Box 900 Registration No. 50,842									
				X Pursuant to 37 CFR 1.34(a)					
		F	Facsimile Number: (908) 730-3649						
MDM:kak		PATENT TRAC	EMARK OFFICE				7/21/2004		